



**State of New Hampshire
Liquor Commission
Division of Enforcement & Licensing**



VENDOR REPRESENTATIVE APPLICANT CHECKLIST

To All Applicants:

The following documents shall be provided for Licensing under Title XIII New Hampshire Liquor Law. RSA 178:3 III is specific in detailing the qualifications for each applicant. Copies of each document **MUST** be submitted and will be retained by the New Hampshire Liquor Commission Division of Enforcement & Licensing in Concord, New Hampshire. Each document must appear in the Applicant's Name (I.E. Sole Proprietor, Partnership, LLC, or Corporation.)

1. ☐ Certificate of Registered Trade Name (NH Secretary of State)
2. ☐ Application for Registration for Liquor Representative (L-055 attached)
3. ☐ Partnership Agreement (Gen/Ltd) & Certificate of Registration with the NH Secretary of State
4. ☐ Affidavits (L-002 or L-035) filed by Proprietor, Each Partner, Each Corporate Officer & Director, LLC Member and LLC Manager.

CORPORATION APPLICANT to be provided in addition to 1 through 4

5. ☐ Certificate of Incorporation or certificate of good standing.
6. ☐ Certificate of Authority if non-NH corporation (obtain from NH Secretary of State 603-271-3244 or on-line at <http://www.sos.nh.gov/corporate/corpforms2.html>)
7. ☐ Articles of Incorporation
8. ☐ Minutes of Organizational Meeting
9. ☐ Minutes of most recent Corporate Meeting electing current officers/directors
10. ☐ Bylaws
11. ☐ Stock Certificates (if issued)
12. ☐ Complete list of all current Corporate Officers (full name, legal address, date of birth, place of birth)

LIMITED LIABILITY COMPANY to be provided in addition to 1 through 4

5. ☐ Certificate of Formation
6. ☐ Certificate of Authority if non-NH LLC (obtain from NH Secretary of State 603-271-3244 or on line at <http://www.sos.nh.gov/corporate/corpforms2.html>)
7. ☐ LLC Agreement
8. ☐ Disclosure of all current members (full name, legal address, date of birth, place of birth)
9. ☐ Appointment of LLC Manager (full name, legal address, date of birth, place of birth)

ONCE ALL PAPERWORK ABOVE IS COMPLETE, PLEASE CALL 603 271-3521 FOR CORRECT FEE AS FEE IS PRO-RATED

For Questions regarding this paperwork, call Licensing at 603-271-3521



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NEW HAMPSHIRE LIQUOR COMMISSION APPLICATION FOR REGISTRATION

The Undersigned _____ of the city of _____
Name of Company Location

In the State of _____ hereby requests that the application of _____
Name of Liquor Wine Rep's Company

for the registration as the Liquor Wine Representative of this company be granted.

We certify:

- a. That to the best of our knowledge the information given by the applicant is true and correct;
- b. That to the best of our knowledge the applicant is honest, truthful, of good reputation and has never been refused registration as a representative of a distiller or wine manufacturer in any state or had such registration cancelled and that his is entirely worthy of being granted a registration;
- c. That he is entitled to enter a liquor store in the State only with specific permission of the Commission and then only for purposes of sales promotions and to secure information on inventory movement;
- d. That the applicant has been advised
 1. That he is to conduct himself as our representative strictly in accordance with the relevant provisions of the New Hampshire Liquor Commission and the regulations made there under and directions issued by the Commission from time to time;
 2. That he may call upon licensed premises to promote the listed product he represents. If samples are given, they must have been purchased from a New Hampshire retail store. Samples are restricted for this use only;
- e. That we will notify the Board immediately if the applicant ceases to be employed by our company.

Name of Company

Signature of Officer

Title

_____ ss Date: _____

Personally appeared before me _____ known to be the person
Signing Officer of Company

who executed the above affidavit and made oath that the same is true. _____
Justice of Peace or Notary Public



**State of New Hampshire
Liquor Commission
Division of Enforcement & Licensing**



AFFIDAVIT

This affidavit is filed with the Liquor Commission's Division of Enforcement & Licensing in support of *my ownership, management control, employment by a business licensed, or applying for a license to sell alcoholic beverages* under Chapter 178 of the Revised Statutes Annotated.

I, _____ being duly sworn do depose and say:
(Print Name)

1. **Business Trade Name:** _____ **Liquor Lic#** _____

Address _____
(No. – Street) (City / Town) (State) (Zip)

Mailing Address _____
(No. – Street) (City / Town) (State) (Zip)

2. I live at: _____
(No. – Street) (City / Town) (State) (Zip)

3. I was born in _____ on _____
(POB: i.e. State, or Province if Canada, Country if foreign) (Date of Birth) (Age)

Home phone _____ ☐ Male ☐ Female Race _____ Soc. Sec # _____

4. ☐ I am ☐ I am not a citizen of the United States
If not a citizen, R.A. Document # or other Identification submitted _____

5. I have never been convicted of a felony, or any offense that would be classified as a felony had it been committed with the State of New Hampshire, by any state in the United States, the United States government, or any other jurisdiction. **I understand RSA 178:4 & RSA 179:23, IV, prohibit convicted felons from holding a license to sell alcohol or assuming control of licensed premise. By signing this affidavit I hereby authorize and give consent to the Division of Enforcement & Licensing to inquire and examine all records of my conviction(s), if any, using all investigative methods available to them. This authorization is given to support or to contradict my declaration that I have not been convicted of a felony crime. (AFFIANT INITIAL HERE)**

6. I am filing this document in support of my employment as a
☐ Corporate Officer ☐ POA ☐ Person in Charge
☐ Partner ☐ LLC Member ☐ Proprietor
☐ LLC Manager ☐ Manager Title/Position _____

RSA 179:23, IV requires the licensee to designate one or more people to be in charge of the premise in the licensee' absence.

7. I swear before the **Justice of Peace or Notary Public** that this information is **true** and **accurate**, and that this document is signed under the penalty if false swearing (RSA 641:2)

Signature _____ Date _____

County _____ SS. Date: _____

Personally appeared before me _____ known to be the person who executed
and made oath that the same is true. (Affiant Name)

SEAL

Justice of Peace / Notary Public